

ACCOUNT#	

Application for Reduced Garbage Rates

				Blaine who qualifies for ity Code, as amended.
Date:				
Signature:				
Phone Numl	oer:			
Address:				
				-
		-	ection 62-33 (f) (1)	~ 2
(1) The dw prir	3 Reduced rate for se refuse and recycling elling unit (excluding elling unit) occupied by: a. Persons who are ardship shall be deer a. The annual gross income tax return family of four, plus	senior citizens with g collection service manufactured hom 65 years of age or med to exist when a income of the hour does not exceed to \$3,000. If no su	a hardship: charges shall be reduction nes and apartment built older who meet the ha all the following apply: sehold according to its the Federal Poverty Inc.	ced by one-half for any ldings) which is ardship conditions. s most recent federal come Guidelines for a se clerk shall require the
The annual in	come of my househo	old is as follows:		
	Salaries & Wages		\$	
	Social Security		\$	
	Pension/Investment		\$	
		Total (Must not exceed \$	\$	

Garbage rate will be reduced to \$31.50 effective on your next billing after completed form is received in our office